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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/017721-Conf. #5317	
	Filing Date	December 14, 2001	
	First Named Inventor	Jeanette McCarthy	
	Art Unit	1631	
	Examiner Name	Carolyn L. Smith	
Total Number of Pages in This Submission	1	Attorney Docket Number	MMI-003

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	LAHIVE & COCKFIELD, LLP Lisa M. DiRocco - 51,619 for DeAnn F. Smith - 36,683	
Signature		
Date	August 19, 2003	

I hereby certify that this correspondence is being deposited with the U.S. Postal Service by Express Mail, Airbill No. EV 354 230 800 US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below	
Dated: August 19, 2003	Signature: (Lisa M. DiRocco)



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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003, Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 110.00

Compt to If Known

Application Number 10/017721-Conf. #5317
Filing Date December 14, 2001
First Named Inventor Jeanette McCarthy
Examiner Name Carolyn L. Smith
Art Unit 1631
Attorney Docket No. MMI-003

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account

Deposit Account Number 12-0080

Deposit Account Name Lahive & Cockfield, LLP

The Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375			Utility filing fee	
1002	330	2002	165			Design filing fee	
1003	520	2003	260			Plant filing fee	
1004	750	2004	375			Rescue filing fee	
1005	160	2005	80			Provisional filing fee	
SUBTOTAL (1) (\$)							0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1202	18	2202	9			Claims in excess of 20	
1201	84	2201	42			Independent claims in excess of 3	
1203	260	2203	140			Multiple dependent claim, if not paid	
1204	84	2204	42			Reissue independent claims over original patent	
1205	18	2205	9			Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)							0.00

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1501	1,300	2501	650			Utility issue fee (or resue)	
1502	470	2502	235			Design issue fee	
1503	630	2503	315			Plant issue fee	
1400	130	1400	130			Petitions to the Commissioner	
1807	50	1807	50			Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180			Submission of Information Disclosure Stmt	
8021	40	8021	40			Recording each patent assignment per property (times number of properties)	
1809	750	2809	375			Filing a submission after final rejection (37 CFR 1.129(a))	
1810	750	2810	375			For each additional invention to be examined (37 CFR 1.129(b))	
1801	750	2801	375			Request for Continued Examination (RCE)	
1802	900	1802	900			Request for expedited examination of a design application	
Other fee (specify)							
*Reduced by Basic Filing Fee Paid							
SUBTOTAL (3) (\$)							110.00

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

Name (Print/Type) Lisa M. DiRocco for DeAng F. Smith
Registration No. 51,619 for 36,683
Signature *Lisa M. DiRocco*
Telephone (617) 227-7400
Date August 19, 2003

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Signature: *Lisa M. DiRocco* (Lisa M. DiRocco)

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